

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Make DC Listen

Full Name (Last, First, Middle Initial)

**A. Richard Voell**

Mailing Address 13611 Deering Bay Dr

City

Coral Gables

State

FL

Zip Code

33158-2839

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2015

Transaction ID : AA60A5A81EBA24696910

Amount of Each Receipt this Period

250.00

NOTE:EM/Cruz/Trans20150915

Full Name (Last, First, Middle Initial)

**B. Phyllis Pohl**

Mailing Address 10510 Laurel Estates Ln

City

Lake Worth

State

FL

Zip Code

33449-8639

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

90.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	02	/	2015

Transaction ID : AA60D4ED5CDD5486DB9E

Amount of Each Receipt this Period

45.00

NOTE:EM/Cruz/Trans20150909

Full Name (Last, First, Middle Initial)

**C. Babbie Migl**

Mailing Address 1404 Adams Rd

City

Bulverde

State

TX

Zip Code

78163-1904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2015

Transaction ID : AA6248E0C51A846BEA4E

Amount of Each Receipt this Period

50.00

NOTE:EM/Cruz/Trans20151229

SUBTOTAL of Receipts This Page (optional)..... ▶

345.00

TOTAL This Period (last page this line number only)..... ▶